



PASSPORT To Health Provider Handbook



March 2008

This publication supersedes all previous PASSPORT To Health Provider Handbooks. Published by the Montana Department of Public Health & Human Services, December 2003.

Updated September 2004, September 2005, March 2008.

Key Contacts

Hours for Key Contacts are 8:00 a.m. to 5:00 p.m. Monday through Friday (Mountain Time), unless otherwise stated. The phone numbers designated “In state” will not work outside Montana. The numbers designated “TDD” have a telecommunication device for the deaf (TDD) and hard of hearing. Persons with disabilities who need an alternative accessible format of this information, or who require some other reasonable accommodation in order to participate in Medicaid, should contact the Montana Department of Public Health and Human Services through the PASSPORT To Health Program (see *PASSPORT Client Information* below for phone number and address).

Provider Relations

Contact Provider Relations for questions about Medicaid, MHSP, and CHIP eyeglass and dental. Provider Relations can answer questions regarding payments, denials, eligibility, general claims questions, and Medicaid enrollment questions:

(800) 624-3958 In- and out-of-state
(406) 442-1837 Helena
(406) 442-4402 Fax

Send written inquiries to:

Provider Relations Unit
P.O. Box 4936
Helena, MT 59604

Send e-mail inquiries to:

MTPRHelpdesk@ACS-inc.com

For PASSPORT enrollment or caseload questions:

(800) 362-8312

Send PASSPORT correspondence to:

PASSPORT To Health
P.O. Box 254
Helena, MT 59624

PASSPORT Client Information

Clients who have general Medicaid questions may call the **Montana Medicaid Help Line** or write to:

(800) 362-8312 In and out-of-state
(406) 442-2328 Fax

PASSPORT To Health Program
P.O. Box 254
Helena, MT 59624-0254

Client Eligibility

For client eligibility, see the *Client Eligibility and Responsibilities* chapter in the *General Information For Providers* manual.

PASSPORT Program Officer

PASSPORT providers can contact the program officer with policy or program questions, to report errors, omission, or discrepancies in enrollee utilization and cost reports, and to submit inpatient stay documentation.

(406) 444-4540

PASSPORT Program Officer
DPHHS
Medicaid Services Bureau
P.O. Box 202951
Helena, MT 59620-2951

Medicaid Policy Questions

Providers who have Medicaid policy questions may contact the appropriate division of the Department of Public Health and Human Services; see the *Introduction* chapter in the *General Information For Providers* manual.

Secretary of State

The Secretary of State's office publishes the most current version of the Administrative Rules of Montana (ARM):

(406) 444-2055 Phone

Secretary of State
P.O. Box 202801
Helena, MT 59620-2801

CHIP Program

For questions about the Children's Health Insurance Plan:

(877) 543-7669 Phone toll-free
(406) 444-6971 Phone in Helena
(406) 444-4533 Fax In Helena
(877) 418-4533 Fax Toll-free

chip@mt.gov E-mail

CHIP Program Officer
P.O. Box 202951
Helena, MT 59620-2951

Administrative Review Request

To request an administrative review, deliver or mail the request, objections, and supporting document to the following address. The document should be addressed or directed to the division that issued the contested determination.

DPHHS
111 N. Sanders
P.O. Box 4210
Helena, MT 59604-4210

Office for Civil Rights

For complaints about alleged discrimination because of race, color, national origin, age or disability. Hours are 8:00 a.m. to 4:00 p.m. Mountain time.

DPHHS, Office of Human Resources
Client Complaint Coordinator
P.O. Box 4210
Helena, MT 59604

(406) 444-3136 In and out-of-state

Office for Civil Rights
U.S. Department of Health and Human Services
Federal Office Building
1961 Stout Street, Room 1426
Denver, CO 80294-3528

(303) 844-2024 In and out-of-state

(303) 844-3439 TDD

Montana Relay Services

Telecommunications assistance for the hearing impaired.

(800) 253-4093 Voice
(800) 253-4091 TDD

Fair Hearing Request

To request a fair hearing, deliver or mail the request to the following address. A copy must also be delivered or mailed to the division that issued the contested determination.

DPHHS
Quality Assurance Division, Office of Fair Hearings
P.O. Box 202953
Helena, MT 59620-2953

Emergency Services Review

Send emergency department review documentation to:

Mountain-Pacific Quality
Health Foundation
3404 Cooney Drive
Helena, MT 59602

Phone:

(800) 262-1545 X150 In state
(406) 443-4020 X150 Out of state and
Helena

Fax:

(800) 497-8235 In state
(406) 443-4585 Out of state and Helena

Team Care Program Officer

For questions regarding the Team Care Program:

(406) 444-4540 Phone
(406) 444-1861 Fax

Team Care Program Officer
DPHHS
Managed Care Bureau
P.O. Box 202951
Helena, MT 59620-2951

Key Web Sites	
Web Address	Information Available
Provider Information Web Portal www.mtmedicaid.org	<ul style="list-style-type: none"> • Medicaid information • Medicaid news • Provider manuals • Notices and manual replacement pages • Fee schedules • Remittance advice notices • Forms • Provider enrollment • Frequently asked questions (FAQs) • Upcoming events • Electronic billing information • Newsletters • Key contacts • Links to other websites and more • Montana Access to Health: Eligibility, provider summary information, claim status and payment amounts, X12 transactions, remittance advices, enrollment, and medical claims history for hospitals, physicians, and mid-level practitioners
Client Information Website http://medicaidprovider.hhs.mt.gov/clientpages/clientindex.shtml	<ul style="list-style-type: none"> • Medicaid program information • Client newsletters • Who to call if you have questions • Client Notices & Information
Children's Health Insurance Plan (CHIP) Website www.chip.mt.gov	<ul style="list-style-type: none"> • Information on the Children's Health Insurance Plan (CHIP)
Centers for Disease Control and Prevention (CDC) website www.cdc.gov/nip	Immunization and other health information
Medicaid Mental Health and Mental Health Services Plan http://www.dphhs.mt.gov/mentalhealth/index.shtml	Mental Health Services information for Medicaid and MHSP

Client Education Resources		
Resource	Description	Where to Get
General Medicaid Handbook	All potentially eligible Medicaid clients are given a general Medicaid handbook entitled, <i>Your New handbook, What You Need to Know</i> . This handbook is an excellent resource for Medicaid information for all clients enrolled in Montana Medicaid.	<ul style="list-style-type: none"> • Client Information Website • Montana Medicaid Help Line
PASSPORT Client Handbook	The <i>PASSPORT To Health Handbook for Clients</i> is mailed to the client once he or she is enrolled with a PASSPORT provider. This handbook provides information about PASSPORT policy, the use of the emergency department, Well Child Check Ups, pregnancy care, preventive care, the complaint and grievance process, and more.	<ul style="list-style-type: none"> • Client Information Website • Montana Medicaid Help Line
Montana Medicaid Help Line	A toll-free Montana Medicaid Help Line is available to answer client's questions or take their PASSPORT enrollment. The Montana Medicaid Help Line may also direct clients to other Medicaid-related entities.	1-800-362-8312
Preventive Materials	Preventive health care letters are mailed out yearly to different Medicaid client age groups just before their birthday. An immunization schedule is available on the website.	<ul style="list-style-type: none"> • Client Information Website • Montana Medicaid Help Line
PASSPORT Need to Choose Letter	If a client moves to a different county in Montana, PASSPORT To Health attempts to contact the client to select a new PASSPORT provider. If contact with the client is unsuccessful, this letter is sent requesting the client to select a new PASSPORT provider in their new county. Enclosed with the letter is a list of PASSPORT providers available in their new county and a PASSPORT change of provider form.	<ul style="list-style-type: none"> • Montana Medicaid Help Line
PASSPORT Client Newsletters	All households enrolled in PASSPORT are mailed a quarterly <i>PASSPORT To Health Client Newsletter</i> . The newsletters provide new information on PASSPORT, reminders regarding their Medicaid use, and health notices.	<ul style="list-style-type: none"> • Client Information Website • Montana Medicaid Help Line
Client Information Website	On the Client Information website clients will find Medicaid program information, client newsletters, who to call if you have questions, and client notices and information.	http://medicaidprovider.hhs.mt.gov/clientpages/clientindex.shtml

Definitions and Acronyms

This section contains definitions, abbreviations, and acronyms used in this manual.

Administrative Review

Administrative reviews are the Department's effort to resolve a grievance about a Department decision in order to avoid a hearing. The review includes an informal conference with the Department to review facts, legal authority, and circumstances involved in the adverse action by the Department.

Administrative Rules of Montana (ARM)

The rules published by the executive departments and agencies of the state government.

Authorization

An official approval for action taken for, or on behalf of, a Medicaid client. This approval is only valid if the client is eligible on the date of service.

Basic Medicaid

Patients with Basic Medicaid have limited Medicaid services. See *Appendix A: Medicaid Covered Services*.

Centers for Medicare and Medicaid Services (CMS)

Administers the Medicare program and oversees the state Medicaid program. Formerly the Health Care Financing Administration (HCFA).

Children's Health Insurance Program (CHIP)

This plan covers some children whose family incomes make them ineligible for Medicaid. DPHHS sponsors the program, which is administered by BlueCross BlueShield of Montana.

Client

An individual enrolled in a Department medical assistance program.

Cosmetic

Serving to modify or improve the appearance of a physical feature, defect, or irregularity.

Cost sharing

The client's financial responsibility for a medical bill, usually in the form of a flat fee.

DPHHS, State Agency

The Montana Department of Public Health and Human Services (DPHHS or Department) is the designated State Agency that administers the Medicaid program. The Department's legal authority is contained in Title 53, Chapter 6 MCA. At the Federal level, the legal basis for the program is contained in Title XIX of the Social Security Act and Title 42 of the Code of Federal Regulations (CFR). The program is administered in accordance with the Administrative Rules of Montana (ARM), Title 37, Chapter 86.

Early Periodic Screening Diagnosis and Treatment (EPSDT)

This program provides Medicaid-covered children with comprehensive health screenings, diagnostic services, and treatment of health problems.

Emergency Services

Emergency medical services are those services required to treat and stabilize an emergency medical condition.

Fair Hearing

Providers may request a fair hearing when the provider believes the Department's administrative review determination fails to comply with applicable laws, regulations, rules or policies. Fair hearings include a hearings officer, and can include attorneys, and witnesses for both parties.

Full Medicaid

Patients with Full Medicaid have a full scope of Medicaid benefits. See *Appendix A: Medicaid Covered Services*.

Group PASSPORT Provider

A Group PASSPORT To Health provider is enrolled in the program as having one or more Medicaid providers practicing under one PASSPORT number.

Indian Health Services (IHS)

IHS provides federal health services to American Indians and Alaska Natives.

Montana Access to Health Web Portal

A secure website on which providers may view clients' medical history, verify client eligibility, submit claims to Medicaid, check the status of a claim, verify the status of a warrant, and download remittance advice reports.

Medicaid

A program that provides health care coverage to specific populations, especially low-income families with children, pregnant women, disabled people and the elderly. Medicaid is administered by state governments under broad federal guidelines.

Medically Necessary

A term describing a requested service which is reasonably calculated to prevent, diagnose, correct, cure, alleviate or prevent worsening of conditions in the client. These conditions must be classified as one of the following: endanger life, cause suffering or pain, result in an illness

or infirmity, threaten to cause or aggravate a handicap, or cause physical deformity or malfunction. There must be no other equally effective, more conservative or substantially less costly course of treatment available or suitable for the client requesting the service. For the purpose of this definition, "course of treatment" may include mere observation or, when appropriate, no treatment at all.

Medicare

The federal health insurance program for certain aged or disabled clients.

PASSPORT Approval Number

This is the number the PASSPORT provider gives to other providers when approving services. This is a seven digit number issued to the PASSPORT provider and must be on the claim or Medicaid will deny the service.

Prior Authorization (PA)

The approval process required before certain services or supplies are paid by Medicaid. Prior authorization must be obtained before providing the service or supply.

Provider or Provider of Service

An institution, agency, or person:

- Having a signed agreement with the Department to furnish medical care and goods and/or services to clients; and
- Eligible to receive payment from the department.

Retroactive Eligibility

When a client is determined to be eligible for Medicaid effective prior to the current date.

Sanction

The penalty for noncompliance with laws, rules, and policies regarding Medicaid. A sanction may include withholding payment from a provider or terminating Medicaid enrollment.